Testimony provided for February 11, 2010 Appropriations Committee Public Hearing regarding the Governor's Mid-term Budget Adjustments, respectfully submitted to:

Senator Harp and Representative Geragosian:

My name is Karen Steinberg Gallucci. I am testifying today against the Governor's Mid-term Budget Adjustments. I am a clinical psychologist at the University of Connecticut Health Center where I have worked since 1994. I have conducted research on child attachment and early social-emotional development, child maltreatment, post-traumatic stress disorder, and the impact of treatment interventions with various populations. I currently direct two programs funded by the Children's Trust Fund, currently part of the Department of Social Services, which is at grave risk of being eliminated under the governor's proposed mid-term budget adjustments. One program is Nurturing Families which you will be hearing about from other speakers this evening. This is an essential program for preventing child abuse and neglect among at-risk, high risk, and struggling first time families throughout our state.

It should be self-evident that preventing child maltreatment has profound benefits for individuals and society, resulting in significant and measurable cost savings. According to the National Child Abuse and Neglect Data System, close to a million children were found to be victims of child abuse or neglect in 2007. According to an Economic Impact Study reported by Wang & Holton (2007), "the estimated annual cost of child abuse and neglect is \$103.8 billion in 2007 value. This figure represents a conservative estimate". It does not include costs associated with interventions for perpetrators and other family members, nor does it incorporate the pain, suffering, and impaired quality of life that victims of child maltreatment sustain.

Our site at UConn has been in operation for close to 3 years. We have screened over 500 families, provided intensive home visitation services for over 60 women and their children, have provided educational and support groups for 70 families, and have provided about 250 new mothers with ongoing support and assistance with accessing resources. These families are benefiting from these needed services as has been demonstrated by the University of Hartford Center for Social Research reports. The Children's Trust Fund supports this program and 41 others throughout the state, reaching 15,000 families every year. Research on abuse prevention show that savings range from a short-term investment of \$1 for every \$1 invested, rising to more than \$6 over the longer term. The cost-offset associated with preventing a child from becoming involved with DCF investigations, placements, and later on, possibly the correctional systems, cannot be ignored.

The second program I direct is the Maternal Depression Project, also designed and supported by the Children's Trust Fund. This is a controlled clinical trial to evaluate the efficacy of an inhome cognitive-behavioral treatment for new mothers experiencing post-partum depression. We anticipate serving 50 women over the next two years, and many more beyond that if the trial proves the intervention to be successful. There is evidence from a group of investigators at Cincinnati Children's Hospital and Medical Center that suggests this treatment is very helpful with this population. Why focus on maternal depression? We know that many new mothers are at risk for depression, and that there are many short and long term consequences of maternal

depression on these women and their families. Children of depressed mothers, for example, are at risk for insecure attachment formation, social and emotional difficulties at school age, cognitive delays, impaired early socialization, and later internalizing and externalizing problems, such as involvement in juvenile justice, mental health, and addiction service systems. By treating the new mother in her home with a structured model of treatment, these negative sequelae may be greatly reduced or eliminated. In-home treatment also serves to address the barriers to service delivery to this population which often includes lack of transportation to the therapist, lack of childcare, and lack of funds and/or insurance to cover the cost.

These crucial services would not otherwise be available to these women and families without the support and infrastructure provided by the Children's Trust Fund.

Here is the bottom line: We will all pay the price, now or later. Cutting these programs supported by the Children's Trust Fund is not cost saving in any but the most constricted perspective which ignores a wealth of research, clinical, and anecdotal evidence to the contrary. These cuts will likely result in a negative cascade that may harm and devastate future generations for years to come.

In the words of the great political and spiritual leader, Nelson Mandela:

Safety and security don't just happen, they are the result of collective consensus and public investment. We owe our children, the most vulnerable citizens in our society, a life free of violence and fear.

There can be no keener revelation of a society's soul than the way in which it treats its children.

Thank you for your consideration of this testimony and please vote <u>against</u> the Governors' Mid-term Budget Adjustments.